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FORM D **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION OMB Number: 3235-0076 Washington, D.C. 20549 Expires: April 30, 2008 SEC Mail Processing ated average burden SEC Mail Processing Section hours per response . . . 16.00 FORM D section **NOTICE OF SALE OF SECURITIES** MAY 0 2 2008 PURSUANT TO REGULATION D, Prefix SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION Vashington, DC vvasnington, DC 111

Name of Offering Phronesis Partners, L.F		s is an amendmen	t and name has ch	anged, and inc	ficate change.)	
Filing Under (Check box(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule	506 [] Section 4	4(6) [] ULOE
Type of Filing:	[] New Filing	[X]	Amendment			
	" -	A. BASI	C IDENTIFICATION	N DATA		
Enter the information req	uested about the issu	ier				
Name of Issuer Phronesis Partners, L.F		s is an amendmen	t and name has ch	anged, and inc	dicate change.)	
Address of Executive Offices (Number and Street, City, State, Zip Code) 130 East Chestnut Street, Suite 403, Columbus, Ohio 43215					Telephone Number (614) 224-3800	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same As Above					Telephone Number Same As Above	08049754
Brief Description of Busin The Issuer seeks to Inve		ecurities and/or	other financial ins	trumante		
Type of Business Organiz		eculides and/or	Other illianicial ills	u uments.		PROCESSED
[] corporation		[X] limited pa	rtnership, already f	ormed	[] other (please s	specify):
[] business trust		[] limited par	tnership, to be form	ned		MAY 0 6 2008
Actual or Estimated Date	•		Month/Year 08/1992	[X] Actua		THOMSON
Jurisdiction of Incorporati	on or Organization:	· · · · · · · · · · · · · · · · · · ·	U.S. Postal Servic		for State:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filled with the SEC. Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner		
Full Name (Last name first, if individual) Wiggins, III, James E.				112 303 304 30		
Business or Residence Address (Numl 130 East Chestnut Street, Suite 403 Columbus, Ohio 43215	ber and Street, City, State, Zi	p Code)				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Num!	ber and Street, City, State, Zi	p Code)				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Numl	ber and Street, City, State, Zi	p Code)				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Numl	per and Street, City, State, Zi	p Code)				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Number	per and Street, City, State, Zi	p Code)				
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Numb	per and Street City State 7i	n Code)				

	B. INFORMATION ABOUT OFFERING						
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						
2.							
3.	(* Subject to waiver by the General Partner.) Does the offering permit joint ownership of a single unit?						
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.						
	l Name (Last name first, if individual) t applicable.						
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)						
Na	me of Associated Broker or Dealer						
	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers neck "All States" or check individual States)						
Ţ	[] All States AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] HI [] ID [] IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [] AT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] OH [] OK [] OR [] PA []						
	RI[] SC[] SD[] TN[] TX[] UT[] VT[] VA[] WA[] WV[] WI[] WY[] PR[]						
	l Name (Last name first, if individual)						
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)						
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Bus	siness or Residence Address (Number and Street, City, State, Zip Code)						
Na	me of Associated Broker or Dealer						
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I M	[] All States AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] HI [] ID [] LL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [] AT [] NE [] NV [] NH [] NJ [] NM [] NY (] NC [] ND [] OH [] OK [] OR [] PA [] RI [] SC [] SD [] TN [] TX [] UT [] VT [] VA [] WA [] WV [] WI [] WY [] PR []						

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold Debt......\$ 0 \$ 0 0 0 \$ □ Common □ Preferred Partnership Interests.....\$ 1,000,000,000(a) \$ 13,691,380 Other (Specify:)......\$ 0 \$ 1.000,000,000(a) \$ 13,691,380 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors \$ 12,387,297 65 Non-accredited Investors \$ 1,304,083 28 Total (for filings under Rule 504 only)..... N/A \$ N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of **Dollar Amount** Sold Security Rule 505 N/A Regulation A N/A \$ Rule 504 \$ N/A Total N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. X Transfer Agent's Fees Printing and Engraving Costs X \$ Legal Fees X \$ 35.000 Accounting Fees..... \boxtimes \$ 7.500 X \$ Engineering Fees..... Sales Commissions (specify finders' fees separately) {XI \$ (区) \$ 5.000

50,000

ΙXΙ

⁽a) Open-ended fund; estimated maximum aggregate offering amount.

4.	 C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE b. Enter the difference between the aggregate offering price given in response 					
	Question 1 and total expenses furnished in response to Part C - Question 4.a. T the "adjusted gross proceeds to the issuer."	his differ	ence is			\$ 999,950,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or used for each of the purposes below. If the amount for any purpose is not kn estimate and check the box to the left of the estimate. The total of the payments li the adjustment gross proceeds to the issuer set forth in response to Part C - Questi	own, furr sted mus	nish an it equal			
			Paymer Office Director Affiliat	rs, rs, &		Payments to Others
	Salaries and fees	X	\$	<u>o</u>	図	\$ <u>0</u>
	Purchase of real estate	X	\$	<u>o</u>	X	\$ <u>0</u>
	Purchase, rental or leasing and installation of machinery and equipment	Œ	\$	<u>o</u>	X	\$ <u>0</u>
	Construction or leasing of plant buildings and facilities	X	\$	<u>o</u>	X	\$ <u>0</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	X	\$	<u>o</u>	X	\$ <u>0</u>
	Repayment of indebtedness	X	\$	<u>0</u>	X	\$ <u>0</u>
	Working capital	X	\$	<u>o</u>	X	\$ <u>0</u>
	Other (specify): Portfolio Investments	X	\$	<u>o</u>	X	\$ <u>999,950,000</u>
	Column Totals	X	\$	<u>o</u>	X	\$ <u>999,950,000</u>
	Total Payments Listed (column totals added)	X	\$ <u>999,950,000</u>			
	D. FEDERAL SIGNATURE					

Issuer (Print or Type)
Phronesis Partners, L.P.

Signature

Date

9/14/08

Name (Print or Type) James E. Wiggins, III Title of Signer (Print or Type) General Partner

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

